ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	FIL		U-30-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	ER	706	6-26-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

~	Rejected	N	Non-elected
	Allowed	1	Interference
	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

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Claim	Date	Claim	Date	Claim	Date
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2 /	++++	52 /		102	
3		53 /		103	
4		54		104	
5		55		105	\perp
6		56		106	
7		57		107	-
8		58		108	
9		59		109	- - - - -
10		60	 	111	+++
12		62	 	112	- - -
13		63	 	113	+++
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15		65	 	115	
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18		68		118	no miles yes
19		69		119	
20		70		120	
21		71		121	
22		72		122	
23		73		123	
24		74		124	
25		75		125	
26 √		76		126	
27 0		77		127	
28 ()		78		128	
29 0		79		129	
(31)		80		130	
		81		131	
32 1	 	82 83		133	++++
34		84	 	134	
35	 	85		135	
36		86	++++	136	
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44		94		144	
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Q4X		97		147	
48		98		148	
		99		149	
150		100		150	

EST AVAILABLE COPY

If more than 150 claims or 10 actions staple additional sheet here